FOR OFFICE USE ONLY:

AMOUNT AWARDED:

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| **Application for St. Catharine’s College Postgraduate Travel and Research Funds****Part I – To be completed by the applicant**

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| --- | --- |
| **Name**: | **Year of study:** |
| **Degree** (e.g. PhD/MPhil): | **Email address:**  |
| **Subject** (e.g. History):  | **Have you applied for funds before?** **(Y/N)** |

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| **1. Application details****1a. Reason for travel or research expenditure. Please briefly outline the relevance of this application to your current research or course of study:** |
| **1b. Have you received or are you applying to any other sources for assistance towards these costs? Please give details including amount applied for or secured, and expected date of funding decision:** |

**2. Total costs arising from application***NB* * *Research equipment costs are deemed to be a departmental responsibility: only apply for equipment in exceptional cases, stating why the department cannot fund this item.*
* *The Postgraduate Fund does not cover membership fees to organisations.*
* *The Postgraduate Fund does not cover subsistence costs.*

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| **Total cost of trip/expense:** | **£** |
| **External funding secured:** | **£** |
| **Funding sought elsewhere:** | **£** |
| **Amount of College contribution sought:** | **£** |

 **3. Breakdown of expenditure**1. For travel expenditure, please provide a full breakdown of all travel expenditure and a brief summary of travel itinerary, including location, dates, and costs.
2. For accommodation, please provide costs per night and duration of stay required.
3. For research expenditure, please list details and costs of each item required.

**Please make 'green' travel decisions where possible and consider the necessity of air travel in light of the climate crisis.**

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| --- | --- |
| **Travel** |  |
| **Accommodation**  |  |
| Research |  |
| **Conference** |  |
| **Other costs** |  |

**4. Payment details and confirmation**We will pay any successful awards directly into a UK bank account. Please provide details of your current bank account below:

|  |  |
| --- | --- |
| **BANK DETAILS** |  |
| Name on account: |  |
| Account number: |  |
| Sort code: |  |
| Bank name: |  |

**I confirm that the information which I have given on this application is complete and true**

|  |  |
| --- | --- |
| Signature (e-signature or printed): | Date: |

**Part II – To be completed by the supervisor**

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| **Name**:  | **Email:**  |
| **Department/Faculty/Research Group:**  |

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| **How relevant is this application to the student’s research?** |
| **Why can’t this project be fully funded by your Department/Faculty/Research Group?**  |

**I confirm that the information which I have given here is true.**

|  |  |
| --- | --- |
| Supervisor’s signature (e-signature or printed): | Date: |

**Once completed, please email this application form to the postgraduate administrator, St Catharine’s College.**Email: grad.admin@caths.cam.ac.uk  |